

About Your HMO



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How To Use Your HMO

Now that you are a member of BLUE CROSS AND BLUE SHIELD OF FLORIDA'S HEALTH OPTIONS, it is essential that you properly utilize your health care benefits. By understanding and following the guidelines outlined below, you can be sure you receive complete and uncomplicated coverage by BLUE CROSS AND BLUE SHIELD OF FLORIDA'S HEALTH OPTIONS.

PLEASE READ YOUR MEMBER HANDBOOK! Your Handbook is your comprehensive guide to your BLUE CROSS AND BLUE SHIELD OF FLORIDA'S HEALTH OPTIONS coverage. The terms and conditions specified in your Handbook prevail at all times. **The following guidelines may or may not apply to your individual HEALTH OPTIONS contract.**

Remember, your health care benefits through BLUE CROSS AND BLUE SHIELD OF FLORIDA'S HEALTH OPTIONS can be of greatest value to you if you are a conscientious member. Your cooperation and interest allows BLUE CROSS AND BLUE SHIELD OF FLORIDA'S HEALTH OPTIONS to continue to offer unsurpassed health care coverage.

The Role of Your Primary Care Physician

All of your medical care begins with your Primary Care Physician who coordinates your health care needs. Your Primary Care Physician ensures that there is not costly duplication of services and that you are properly referred to specialists or admitted to hospitals when such care is needed.

HEALTH OPTIONS will not pay for routine or elective medical care unless the care has been arranged by your Primary Care Physician. **You are responsible for the full cost of any non-emergency care which is neither provided nor arranged by your Primary Care Physician.**

Your First Visit to Your Primary Care Physician

If you've selected a doctor whom you've never used before as your Primary Care Physician, your first visit should be arranged as soon as possible. This visit is an opportunity for you and your Primary Care Physician to review and document your medical history together and establish a physician/patient relationship.

Five Easy Steps to Follow:

1. *Check to make sure you have your membership card.*
2. *Be sure your Primary Care Physician's name is on the membership card.*
3. *Call your Primary Care Physician's office to make an appointment.*
4. *Have your co-payment with you.*
5. *Arrive at least 15 minutes early to fill out insurance information and make arrangements for your medical records to be transferred to your Primary Care Physician's office.*

Changing Your Primary Care Physician

To change your Primary Care Physician, call Customer Service in Jacksonville at 363-1282 or 800/457-4713, or in Gainesville at 371-8333 or 800/247-5349. If the request is received by Customer Service by the 15th of the month, the change will be effective the first day of the following month. Please be sure to have your medical records transferred to your new Primary Care Physician. You should continue to see your current PCP until the change is effective with your new PCP.

Referrals To Specialists

Your Primary Care Physician is responsible for coordinating all your medical treatment, including referrals to specialists. There may be times when your Primary Care Physician will need to refer you to a plan specialist for care. In these instances, your Primary Care Physician will contact Health Options to obtain authorization before you receive care from a plan specialist.

Specialists are located throughout the service area. **Please do not contact a specialist directly.** If you or your family need specialty care, your Primary Care Physician will refer you to a contracted specialist with whom he or she routinely works.

Referrals are very specific as to type and duration of treatment. If you have questions regarding the number of visits authorized or the time frame for these services, please ask your Primary Care Physician or contact Health Options Customer Service to explain. Please be careful, if you receive elective or routine medical care without appropriate authorization from your PCP, **YOU WILL HAVE TO PAY FOR SERVICES RENDERED.**

Direct Access to Specialists

Members may directly access care for the services listed below (as covered by their plan of benefits) without a referral from the Primary Care Physician. You **MUST** choose from the list of participating providers in your Health Options directory.

1. Chiropractic Services
2. Podiatry Services

Hospital Admissions

All elective services, including maternity, must be provided at a participating facility and must be precertified by Health Options at least 5-7 days prior to admission. Your Health Options Primary Care Physician or specialist you have been referred to will coordinate your admission and precertification. **If you have an emergency admission to a hospital, it is imperative you or a family member notify your PCP within 24 hours of admission.**

Emergency Guidelines *(see below)*

If you require **EMERGENCY CARE**, please contact your PCP first, if possible. If it is impossible to first contact your PCP, you must notify him or her within 48 hours to coordinate billing and to arrange follow-up care.

If you go to an emergency room for non-emergency care without being directed to do so by your PCP, **YOU WILL HAVE TO PAY FOR SERVICES RENDERED.**

Follow-Up Care

If your emergency room visit requires follow-up treatment, be sure to call your Health Options PCP before visiting any specialists or other treatment facilities. Additional authorization will be required for follow-up care and this should be coordinated by your PCP.

REMEMBER, IF THESE PROCEDURES ARE NOT FOLLOWED, YOU WILL BE RESPONSIBLE FOR ANY INCURRED MEDICAL EXPENSES.

EMERGENCY GUIDELINES

| SITUATION: | DEFINITION: | INSTRUCTIONS: |
|-----------------------------|--|---|
| <i>Urgent Care ...</i> | A condition that requires immediate treatment. For example: broken limbs and cuts that require stitches. | 1. Call your Primary Care Physician (PCP) for instructions. REMEMBER: Your PCP, or an associate, is on call 24 hours a day, 7 days a week to address your medical situation. |
| <i>Life Threatening ...</i> | A condition that threatens the life of an individual. For example: heart attack, stroke, poisoning, loss of consciousness or respiration, convulsions. | 1. Go to the nearest emergency room. 2. Tell the hospital staff you are a Health Options member and request that they contact your PCP as soon as possible (this will enable your PCP to properly coordinate your care). |

Just Show Your Membership ID Card ... and You Won't Have Any Claims to File.

When you receive your membership ID card, keep it in your wallet at all times and present it when you visit any of our providers. This card will tell the doctor or hospital staff that you're a member of our plan. Best of all, you won't have to fill out a claim form. Our providers will take care of that for you!

BACK:

CARRY THIS CARD WITH YOU AT ALL TIMES. IT MUST BE PRESENTED EACH TIME YOU REQUIRE SERVICES. ALWAYS CONTACT YOUR PRIMARY CARE PHYSICIAN FOR ALL MEDICAL SERVICES. THIS CARD IS NOT TRANSFERABLE AND DOES NOT CREATE ANY LEGAL OBLIGATION. CONSULT YOUR MEMBER HANDBOOK FOR BENEFIT INFORMATION. IF LOST OR STOLEN NOTIFY HEALTH OPTIONS IMMEDIATELY.

NOTICE TO ALL HOSPITALS AND PHYSICIANS:
THIS CARD DOES NOT ENTITLE ANY INDIVIDUAL TO ANY BENEFITS UNLESS APPLICABLE DUES AND FEES HAVE BEEN PAID. TO CONFIRM CURRENT BENEFIT STATUS CALL THE HEALTH OPTIONS CUSTOMER SERVICE PHONE NUMBER LISTED INSIDE THIS CARD. FOR AUTHORIZATION OF SERVICES AND REQUIRED NOTIFICATION OF EMERGENCY CARE, CONTACT THE PATIENT'S PRIMARY CARE PHYSICIAN LISTED INSIDE THIS CARD. SOME SERVICES REQUIRE PRE-CERTIFICATION. CALL THE HEALTH OPTIONS PRE-CERTIFICATION NUMBER LISTED INSIDE THIS CARD. MAIL ALL CLAIMS TO THE ADDRESS LISTED INSIDE CARD.

The back of the card provides general card usage information for the member and hospital.

FRONT:




SUBSCRIBER: CUSTOMER, VALUED SUBSCRIBER

NO.: 61111111101

GROUP: 444444 PLAN: 11PN

Health Options, Inc. is an HMO subsidiary of Blue Cross and Blue Shield of Florida, Inc.
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This amount should be collected at the time of service.

Effective dates may vary for group and subscriber.

INSIDE:

Member, covered spouse and dependent(s). See member identification below.

| | | | |
|--|-------------------|--|--|
| HEALTH OPTIONS, INC. | | GROUP EFF.: 02/01/92 | |
| GROUP: 444444 PLAN: 11PN | | EFF. DATE: 02/01/92 | |
| H E A L T H O P T I O N S | Office Visit | \$15.00 | |
| | IP \$100/Day | \$100.00 | |
| | OP Surgery | \$100.00 | |
| | Emerg. Room Copay | \$50.00 | |
| | RXG7 Pharmacy | \$7.00 | |
| CUST. SVC. PHONE # | | PRE-CERT | |
| OTHER SERVICES MAY HAVE OTHER COPAYMENT REQUIREMENTS | | HEALTH OPTIONS MEMBERS PAY COPAYMENTS DIRECTLY TO PROVIDERS | |

Mailing address and telephone number for claims, inquiries, etc.

Must obtain Medical Authorization and referrals through Pre-Cert telephone number.

The Primary Care Physician assigned to each member will appear on the I.D. card.

Member Identification

The policyholder's Social Security number, followed by the applicable two-digit suffix, identifies covered members.

9 digits + 01 (61111111101) – Policyholder

9 digits + 02 (61111111102) – Spouse

9 digits + 03 (61111111103) – Dependent

9 digits + 04 (61111111104) – Additional Dependent(s)

04-99 – Each Additional Dependent will be assigned a two-digit suffix 04-99.

United States Preventive Services Task Force (USPSTF) Guidelines

The United States Preventive Services Task Force (USPSTF) Guide to Clinical Preventive Services was compiled over a period of 4 years by a panel of twenty experts and established new priorities for medical care.

The Task Force advocates periodic health examinations specific to a patient's age, sex, family history and other risk factors. This guide includes screening tests, counseling procedures and immunizations to promote health and prevent sixty different common diseases/conditions. The illnesses addressed include heart disease, infections, cancer, injuries, alcohol and drug abuse and many others.

Primary Care Physicians have a key role in screening for many of these problems and immunizing against others. Of equal importance, is the physician's role in counseling patients to change unhealthy behaviors and lifestyles.

While the information is directed to Primary Care Physicians, it provides valuable information for anyone interested in his/her own health care.

BIRTH TO 2 YEARS

Primary Care Physician Office Visit:
■ 2, 4, 6, 15, 18 months

Screening:

- Height, weight (at least twice annually)
- Head circumference (min. twice during first year)
- Hematocrit and Hemoglobin (once during infancy)
- Erythrocyte Protoporphyrin (lead poisoning)
- T4, TSH, Phenylalanine blood tests (3-6 days old)

Immunizations:

- DTP-Diphtheria, Tetanus (lockjaw), Pertussis (whooping cough): 2, 4, 6, 12-15 months
- OPV-Oral Polio Vaccine: 2, 4 and 15 months
- Hib-Haemophilus Influenza Type B: 2, 4, 6, 12-15 months
- MMR-Measles, Mumps, Rubella: 15 months
- HBV (Hepatitis B vaccine): Birth, 1-2 months, 6-18 months

Parent Education:

- Diet: breast feedings, iron-rich foods
- Injury prevention: child safety seats, smoke detectors, Poison Control telephone number
- Dental health: baby bottle, tooth decay
- Effects of passive smoke

2 TO 6 YEARS

Primary Care Physician Office Visit:

- Once for immunization; additional visits left to PCP's discretion

Screening:

- Height, weight, blood pressure
- Eye exam for amblyopia strabismus (age 3-5)
- Erythrocyte protoporphyrin (potential lead poisoning)
- Urinalysis

Immunizations:

- DTP-Diphtheria, Tetanus (lockjaw), Pertussis (whooping cough): once during 4-6 years
- OPV-Oral Polio Vaccine: once during 4-6 years
- MMR: Once during age 4-6 years

Parent Education:

- Diet and exercise
- Injury prevention: seat belts, bicycle safety helmets, storage of toxic chemicals and matches, Poison Control telephone number, smoke detectors
- Dental health

7 TO 12 YEARS

Primary Care Physician Office Visit:

- Office visit left to PCP's discretion

Screening:

- Height, weight, blood pressure

Parent/Patient Education:

- Diet and exercise
- Injury prevention: storage of firearms
- Dental health

13 TO 18 YEARS

Primary Care Physician Office Visit:

- Required one time for immunization; additional visits left to PCP's discretion

Screening:

- History
- Physical activity
- Tobacco/alcohol/drug use
- Sexual practices

Physical Examination:

- Height, weight, blood pressure

Laboratory/Diagnostic Procedures:

- Pap smear for sexually active females

Immunizations:

- Tetanus-diphtheria (TD) booster (14-16 years)

Parent/Patient Education:

- Diet and exercise
- Social history
- Sexual practices
- Injury prevention
- Dental health

19 TO 39 YEARS

Primary Care Physician Office Visit:

- Every one to three years

Screening:

- History
- Dietary intake
- Physical activity
- Tobacco/alcohol/drug use
- Sexual practices

Physical Examination:

- Height, weight, blood pressure

Laboratory/Diagnostic Procedures:

- Total blood cholesterol
- Pap smear (every one to three years)

Immunizations:

- Tetanus-diphtheria (TD) booster every 10 years

Patient Education:

- Diet and exercise
- Tobacco cessation
- Limiting alcohol consumption
- Safe sexual practices
- Injury prevention: safety belts, smoke detectors
- Dental health

40 TO 64 YEARS

Primary Care Physician Office Visit:

- Every one to three years

Screening:

- History
- Dietary intake
- Physical activity
- Tobacco/alcohol/drug use
- Sexual practices

Physical Examination:

- Height, weight, blood pressure
- Clinical breast examination (annually)

Laboratory/Diagnostic Procedures:

- Total blood cholesterol
- Pap smear (every one to three years)
- Mammogram (every one to two years beginning at age 50, or at age 35 for those with increased risk)
- Rectal examination and/or stool for occult blood beginning at age 50

Immunizations:

- Tetanus-diphtheria (TD) booster every 10 years
- Influenza vaccine (check with your doctor)

Patient Education:

- Safe sexual practices
- Diet and exercise
- Tobacco cessation
- Limiting alcohol consumption
- Drug use
- Injury prevention: safety belts, smoke detectors
- Dental health

65 YEARS AND OLDER

Primary Care Physician Office Visit:

- Annual office visit

Screening:

- History
- Prior symptoms of transient ischemic attack
- Dietary intake
- Physical activity
- Tobacco/alcohol/drug use
- Functional status at home

Physical Examination:

- Height, weight, blood pressure
- Visual acuity
- Hearing and hearing aids
- Clinical breast examination (annually)

Laboratory/Diagnostic Procedures:

- Total blood cholesterol
- Urinalysis
- Mammogram (every 1-2 years, to age 75)
- Pap smear
- Rectal examination and/or stool for occult blood
- Thyroid function tests (for women)
- Glaucoma testing by an eye specialist

Immunizations:

- Influenza vaccine
- Pneumococcal vaccine
- Tetanus-diphtheria (TD) booster every 10 yrs

Patient Education:

- Diet and exercise
- Limiting alcohol consumption
- Drug use
- Tobacco cessation
- Injury prevention: safety belts, smoke detector, prevention of falls
- Dental health

Clinicians may wish to add other preventive services on a routine basis after considering the patient's medical history and other individual circumstances. Members should discuss any concerns with their physician.